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Sherman "Wes" Cole, Chairperson  
Gary Parker, Vice Chairperson  
January 29, 2018

Sam Brownback, Governor

Committee on Health and Human Services  
Re: House Bill 2512

Dear Chairman Hawkins and Committee Members,

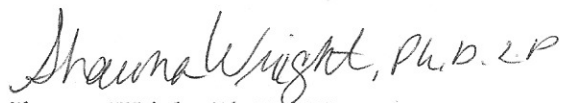
Good afternoon. My name is Shawna Wright, and I am a licensed psychologist with an independent telepsychology practice in southeast Kansas and providing telepsychology services throughout the state (Colby to Galena) for more than five years. I am also a member of the Rural and Frontier Subcommittee of the Governor's Behavioral Health Services Planning Council. The subcommittee had the opportunity to share House Bill 2512 with a diverse group of mental health stakeholders and discussed the bill in our subcommittee meeting last week. Our subcommittee would like to extend our appreciation for the work the Committee on Health and Human Services has dedicated to the development and introduction of this important telemedicine bill. We would also like to express our appreciation for the inclusion of behavioral health providers in this bill. As you may know, rural and frontier mental health providers and agencies have already embraced and implemented telemedicine as a means of increasing access to care and specialists, but program and service development has been limited by the absence of telemedicine legislation. The Rural and Frontier committee is hopeful that HB 2512 will further provide legitimacy and structure to the use and availability of technology for connecting Kansans who live in rural and frontier areas of the state with much needed medical and mental health services.

Given the unique demands experienced by mental health providers including community mental health centers, crisis workers, and other agencies in rural and frontier areas of the state, the Rural and Frontier Subcommittee asks the Committee on Health and Human Services to consider the inclusion of advanced practice registered nurses (APRNs, NPs), licensed by the Kansas State Board of Nursing, in HB 2512. Kansas faces a shortage of licensed adult and child psychiatrists, and the 89 rural and frontier Kansas counties collectively share 14 adult and 3 child psychiatrists. Currently, rural and frontier areas rely upon psychiatrically trained APRNs/NPs to provide psychiatric care and medication management services through both in-person and telemedicine encounters. APRNs/NPs are crucial to our current systems of care, and we would like to see them incorporated in HB 2512.

The Rural and Frontier Subcommittee agrees with the concept of integrated medical and behavioral/mental health care. However, rural and frontier providers live in areas where they may serve multiple roles in a community (e.g., parent-teacher organizations, church groups/youth ministers, scouting leaders, etc.). Given the tight-knit nature of rural and frontier communities and the stigma that may be associated with participating in behavioral/mental health treatment, clients are often protective of their privacy and records. The Rural and Frontier subcommittee encourages the Committee on Health and Human Services to maintain the client's right to give consent prior to the release of mental health records. Additionally, given the on-going nature of behavioral/mental health treatment, it would be helpful for behavioral/mental health providers to be required to seek the consent at the onset of telemedicine treatment but not have to seek such consent at each subsequent event.

In conclusion, as a rural telemedicine provider and member of the Rural and Frontier Subcommittee, I am grateful to the Committee on Health and Human Services for the time and work dedicated to the development of HB 2512. Telemedicine is a resource that can assist Kansans living in rural and underserved areas to connect with providers in their own state. This bill is an important step in developing telemedicine in Kansas and in improving access and quality of care throughout the state. I hope that passing this bill will make it easier for other mental health providers and agencies to develop telemental health programs to address the needs of rural and frontier areas. Legislatively defining telemedicine and providing parameters for implementation is foundational for the development and expansion of telemental health services in our state.

Respectfully,



Shawna Wright, Ph.D., LP  
Wright Psychological Services, LLC  
Rural and Frontier Subcommittee Member

Respectfully,



Renee Geyer, MMC – Grant Coordinator  
Compass Behavioral Health  
Rural and Frontier Subcommittee Chair